## Road to Glory Foundation received MAIL CENTER

Political Action Committee

2015 SEP 24 AM 6: 35

Px: (855) 599-4408

P.O. Box 561 \* Bowle, MD 20718

RoadioGlory.foundation \* Comac@Roadioglory.foundation

September 14, 2015

Federal Election Commission 999 E. Street N.W. Washington, DC 20463

RE: Statement of Organization - Independent Expenditure Only Committee

To Whom It May Concern:

1. 1

Please find enclosed a Form 1 Statement of Organization for the newly formed Road to Glory Foundation Political Action Committee. This committee has not yet received or made any political contributions.

Please let it be known that this committee intends to make independent expenditures and raise funds in unlimited amounts as is consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC. This committee will not use these funds to make contributions, whether direct, in-kind or via coordinated communications to any federal or state candidate or committee.

The Road to Glory Foundation intends to file on a quarterly schedule.

Kindly,

Providencia Ortiz

Treasurer

Road to Glory Foundation PAC

## 2015 - 09 - 24 - 03 - 00023481

**FEC** FORM 1

Only

## STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER

2015 SEP 24 AM 6: 35

Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. oad to Glory Foundation Political Action Box 561 ADDRESS (number and street) (Check if address is changed) Bowie CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) ¡Contact@roadtoglory,foundation (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) http://roadtoglory.foundation (Check if address is changed) DATE FEC IDENTIFICATION NUMBER IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Providencia Ortiz Type or Print Name of Treasurer Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 02/2009)

Toll Free 800-424-9530

Local 202-694-1100

| F                                 | EC For              | rm 1 (Revised 02/2009)  | Page <b>2</b>                            |  |  |  |
|-----------------------------------|---------------------|---|--|--|--|--|
| TYPE OF COMMITTEE                 |                     |   |  |  |  |  |
| Can                               | didate              | e Committee:  |  |  |  |  |
| (a)                               |                     | This committee is a principal campaign committee. (Complete the candidate information below.  | )  |  |  |  |
| (b)                               |                     | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)   |  |  |  |  |
| Name<br>Cand                      |                     |   |  |  |  |  |
| Cand<br>Party                     | idate<br>Affiliatio | Office Sought: House Senate President   | State                                    |  |  |  |
| (c)                               |                     | This committee supports/opposes only one candidate, and is NOT an authorized committee.   |  |  |  |  |
| Name<br>Cand                      |                     |   |  |  |  |  |
| Part                              | y Com               | nmittee:  |  |  |  |  |
| (d)                               |                     | This committee is a (National, State or subordinate) committee of the   | (Democratic,<br>Republican, etc.) Party. |  |  |  |
| Poli                              | tical A             | ction Committee (PAC):  |  |  |  |  |
| (e)                               |                     | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co   | nnected organization is a:               |  |  |  |
|                                   |                     | Corporation Corporation w/o Capital Stock   | Labor Organization                       |  |  |  |
|                                   |                     | Membership Organization Trade Association   | Cooperative                              |  |  |  |
|                                   |                     | In addition, this committee is a Lobbyist/Registrant PAC.   |  |  |  |  |
| (f)                               | $\times$            | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)   |  |  |  |  |
|                                   |                     | In addition, this committee is a Lobbyist/Registrant PAC.   |  |  |  |  |
|                                   |                     | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)  |  |  |  |  |
| Joint Fundraising Representative: |                     |   |  |  |  |  |
| (g)                               |                     | This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate | two or more political                    |  |  |  |
| (h)                               |                     | This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.      | wo or more political                     |  |  |  |
|                                   | Com                 | mittees Participating in Joint Fundraiser   |  |  |  |  |
|                                   | 1.                  | FEC ID number C   |  |  |  |  |
|                                   | 2.                  | FEC ID number   | ~ ~ ~ ~ ~ ~                              |  |  |  |
|                                   | 3.                  | FEC ID number C   |  |  |  |  |
|                                   | 4.                  | FEC ID number   |  |  |  |  |

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| FEC Form 1 (Revised  | d 02/2009)  |                                  |  |  |  |  |  |  |
|--|---|----------------------------------|--|--|--|--|--|--|
| Write or Type Committee Na   |   | ·····                            |  |  |  |  |  |  |
| Road to Glory Foundation Political Action Committee  |   |                                  |  |  |  |  |  |  |
| 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor |   |                                  |  |  |  |  |  |  |
| 1  | 1   |                                  |  |  |  |  |  |  |
|  | 1   |                                  |  |  |  |  |  |  |
| Mailing Address  |   |                                  |  |  |  |  |  |  |
|  |   |                                  |  |  |  |  |  |  |
|  | CITY STATE  | ZIP CODE                         |  |  |  |  |  |  |
| Relationship: Connec   | ted Organization Affiliated Committee Joint Fundraising Representa                              | tive Leadership PAC Sponsor      |  |  |  |  |  |  |
| Custodian of Records: lo books and records.  | dentify by name, address (phone number optional) and position of the pe                         | erson in possession of committee |  |  |  |  |  |  |
| Full Name Prov   | r <mark>idencia Ortiz</mark>  |                                  |  |  |  |  |  |  |
| Mailing Address  | P.O. Box 561  |                                  |  |  |  |  |  |  |
|  |   | <u> </u>                         |  |  |  |  |  |  |
|  | Bowie   | 20718                            |  |  |  |  |  |  |
| Title or Position  | CITY STATE  | ZIP CODE                         |  |  |  |  |  |  |
| Treasurer  | Telephone number  | 5[599                            |  |  |  |  |  |  |
| Treasurer: List the name any designated agent (e.g.)   | and address (phone number optional) of the treasurer of the committee; ., assistant treasurer). | and the name and address of      |  |  |  |  |  |  |
| Full Name of Treasurer   | videncia Ortiz  |                                  |  |  |  |  |  |  |
| Mailing Address  | P.O. Box 561  |                                  |  |  |  |  |  |  |
|  |   |                                  |  |  |  |  |  |  |
| ·  | Bowie MD STATE  | 20718 zip code                   |  |  |  |  |  |  |
| Title or Position Treasurer  |   |                                  |  |  |  |  |  |  |

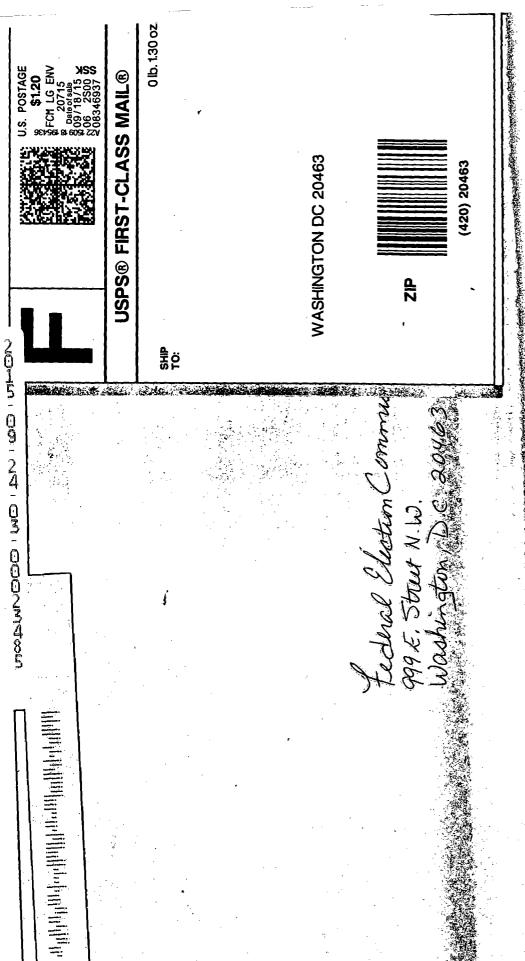
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CITY

STATE

ZIP CODE

Mailing Address



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| (3/2015)  |                              |  |  |  |